FORM D

PROCESTIONSON

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL	
OMB Number:	3235-0076
Expires:	April 30, 2008
Estimated average burden hours per re	sponse 16.00

432124

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	SEC USE	ONLY	
Prefix			Serial
· ·	DATE RE	CEIVED	

Name of Offering ((heck if this is an ame	ndment and name has	s changed,	and indicate c	hange.)			
PRIVATE PLACEMEN	T OF 2008 8% CON	VERTIBLE PROM	IISSORY I	NOTES AND	SERIES A PR			
Filing Under (check bo	x(es) that apply):	☐ Rule 504	☐ Rule 5	505 🖾	Rule 506	☐ Section 4	4(6) ULOE	
Type of Filing:	w Filing	☐ Amendment	_					
		A. BASIC IDE	ENTIFICA	TION DATA				
1. Enter the information i	equested about the iss	uer						
Name of Issuer (□ che	ck if this is an amend	ment and name has ch	hanged, an	d indicate cha	nge.)			
ADUUP, INC.							110100 91901 1100 1190 11 111 (440 141 1 41 141 141 141 141
Address of Executive Off	ces (Number and Stre	et, City, State, Zip Co	ode)		Telephone	Number		
311 Bellevue East, Sui	te 101, Seattle, WA	98102			(650) 770	5-4368		
Address of Principal Busi	ness Operations (Nun	ber and Street, City,	State, Zip	Code)	Telephone	Number	08043	782
(if different from Executiv	e Offices)							
SAME							SEG	
Brief Description of Busin	ness					Mail	Briasaaag	
Advertising technolog	y services						getion	
Type of Business Organiz	ation					ADU	0.0.000	
□ corporation	limited partne	rship, already formed		□ other (ple	ase specify):	дРН	D 8 2008	
☐ business trust	☐ limited partne	rship, to be formed						
			<u>Month</u>	<u>Year</u>		Mack	laeten DC	
Actual or Estimated Date			0 2	0 8 ⊠	Actual Es	timated	300 ·	
Jurisdiction of Incorporati	on or Organization: (Enter two-letter U.S.	Postal Ser	vice abbreviat	ion for State:		102 -	
		CN for Canada; FN	I for foreig	n jurisdiction)	! ! !		

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
• Each promoter of the issuer, if the issuer has been organized within the past five years;
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Rosario, Dylan
Business or Residence Address (Number and Street, City, State, Zip Code)
311 Bellevue East, Suite 101, Seattle, WA 98102
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☑ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Acelar, Rhett
Business or Residence Address (Number and Street, City, State, Zip Code)
311 Bellevue East, Suite 101, Seattle, WA 98102
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full name (Last name first, if individual)
Dee, Marc
Business or Residence Address (Number and Street, City, State, Zip Code)
311 Bellevue East, Suite 101, Seattle, WA 98102
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

☐ Beneficial Owner ☐ Executive Officer ☐ Director

☐ General and/or Managing Partner

Check Box(es) that Apply:

Full name (Last name first, if individual)

☐ Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

				B. II	NFORMAT	TON ABO	UT OFFEI	RING				-
										•	Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							. 🗖	X				
2. What	ic the minir	num invest				_					\$ N/A	
Z. Wilat	is the mini	num mvest	illett tilat w	in oc accep	ica nom an	y marviada.		***************************************		••••••	. 4 1471	<u>`</u>
											Yes	No
										ndirectly, any		
										e offering. If		
a pers	on to be lis	sted is an as	sociated pe	rson or age	nt of a brok	er or deale	r registered	with the SI	EC and/or v	vith a state or		
states,	, list the na rordealer	me of the b	proker or de t forth the in	aler. If mo	ore than fiv for that brol	e (5) perso: cer or deale:	ns to be list ronly.	ted are asso	ciated pers	ons of such a		
		e first, if inc		HOTHILLION		ter or acare	· •					
	,	,	,									
Business	or Residenc	e Address (Number and	d Street, Cit	ty, State, Zip	Code)						-
Name of	Associated 1	Broker or D	ealer						•			
	1000014104	DIOROI OI D										
					to Solicit Pu						_	All Ctatas
(Cnec	K "All State [AK]	es" or cneck [AZ]	[AR]	States)	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	u . [HI]	All States [ID]
[IL]	[[N]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
									[OH]	[OK]	[0R]	[PA]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	· -			[PR]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[FK]
ruii name	(Last name	e first, if inc	iividuai)									
Business	or Residenc	e Address (Number and	d Street, Cit	ty, State, Zij	Code)						
Name of A	Associated l	Broker or D	ealer			·						
States in 1	Which Dogg	an Listad II	an Calinitad	as Intende	to Solicit Pu	b						
											п	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	(TX)	 [ບາງ	. , [VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
		e first, if ind										
D	D: -!		NI	I Canada Cia	C	. C. I.)						
Business	or Residenc	e Address (number and	i Street, Ch	ty, State, Zip	o Code)						
Name of A	Associated I	Broker or D	ealer									
					to Solicit Pu							
							(Dr)		(E1.)	[C 4]		All States
(AL)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[[L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[N1]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	o	Aggregate Iffering Price	Am	ount Already Sold
	Debt	\$	_	\$	
	Equity	\$		<u>s</u>	
	□ Common □ Preferred				· -
	Convertible Securities (including warrants)	\$	500,000	\$	55,000
	Partnership Interests	\$		\$	
	Other (Specify)	\$		<u>s</u>	
	Total		500,000	\$	55,000
	Answer also in Appendix, Column 3, if filing under ULOE.		· · · · · · · · · · · · · · · · · · ·		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors	Do	Aggregate Ilar Amount Purchasers
	Accredited Investors	_	3	\$	55,000
	Non-accredited Investors			\$	
	Total (for filings under Rule 504 only)	_		<u>\$</u>	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			_	
	Type of offering		Type of Security	_	llar Amount Sold
	Rule 505			\$	
	Regulation A	_		\$	
	Rule 504	_	 	\$	
	Total	_		\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	
	Printing and Engraving Costs			\$	
	Legal Fees		×	\$	5,000
	Accounting Fees			\$	
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			\$	
	Other Expenses (identify)			\$	
	Total		Ø	\$	5,000

C. OFFERING	G PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE	OF PROCEEDS	<u> </u>		
Question 1 and total expenses furn	the aggregate offering price given in response to Part ished in response to Part C - Question 4.a. This difference issuer."	e is		\$		495,000
for each of the purposes shown. If and check the box to the left of t	djusted gross proceeds to the issuer used or proposed to be unit the amount for any purpose is not known, furnish an estimate. The total of the payments listed must equal or set forth in response to Part C - Question 4.b above.	nate				
	,		Payments to Officers, Directors, & Affiliates			nents to
Salaries and fees			\$		s	
			\$		\$	
	allation of machinery and equipment		\$		\$	
•	ldings and facilities		\$		\$	
Acquisition of other businesses (in	cluding the value of securities involved in this offering that sets or securities of another issuer pursuant to a merger)			_		-
may be asset in exemulge for the ass	on occurring of anomor issue, pursuant to a morger, in		\$		\$	
Repayment of indebtedness			\$		\$	
Working capital			\$	⊠	\$	495,00
Other (specify):					\$	
Column totals			\$	×	\$	495,000
Total Payments Listed (column totals a	dded)			_ 🛮	\$	495,00
	D. FEDERAL SIGNATURE		•			
signature constitutes an undertaking by	the issuer to furnish to the U.S. Securities and Exchange Conny non-accredited investor pursuant to paragraph (b)(2) of F	mmis	sion, upon writte			
lssuer (Print or Type) ADUUP, INC.	Signature	Date	04-04-	08		
Name of Signer (Print or Type)	Title of Signer (Frint or Type)		-			

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STAT	E SIGNATURE			
				Yes	No
1.	Is any party described in 17 CFR 230.262 presently subject to any See Appendix, Column 5, for		sions of such rule?		⊠
2.	The undersigned issuer hereby undertakes to furnish to any state a CFR 239.500) at such times as required by state law.	dministrator of any state in v	which this notice is filed, a no	tice on F	orm D (17
3.	 The undersigned issuer hereby undertakes to furnish to the state ac offerees. 	lministrators, upon written r	equest, information furnished	by the is	ssuer to
4.	4. The undersigned issuer represents that the issuer is familiar with the Offering Exemption (ULOE) of the state in which this notice is fill the burden of establishing that these conditions have been satisfied.	ed and understand that the is			
	The issuer has read this notification and knows the contents to be true duly authorized person.	and has duly caused this not	ice to be signed on its behalf	by the ur	ndersigned
	ssuer (Print or Type) ADUUP, INC. Signature	102-0	Date 04-04 - C	 8	
	Name of Signer (Print or Type) Oylan Rosario Title of Signer (Print or Type) President	or Type)			

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3	3 4									
	to non-a investor	ed to sell ccredited s in State l-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item I)	Type of investor and amount purchased in State (Part C-Item 2)		amount purcl		amount purchased in State					
State	Yes	No	Series A Preferred Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No				
AL													
AK													
ΑZ													
AR									ı				
CA													
СО													
CT									i				
DE													
DC													
FL													
GA													
HI													
מו													
IL													
ΙΝ													
lA													
KS	····												
KY													
LA													
ME							1						
MD													
MA							·						
MI													
MN													
MS		X	\$20,000	1	\$20,000	0	0		х				
МО													
MT													

APPENDIX

1		2	3		5					
	to non-a	ed to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Series A Preferred Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
NE										
NV										
NH								1		
NJ										
NM										
NY										
NC								1		
ND			· · · · · · · · · · · · · · · · · · ·					}		
ОН								<u> </u>		
OK										
OR										
PA										
RI										
SC										
SD									}	
TN										
TX										
UT										
VT										
VA										
WA		X	\$35,000	2	\$35,000	0	0		х	
WV										
WI										
WY										
PR										

